Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 5 of 50

| Fill | in this information to identify your case: | | |
|------------|--|------------|-----------------------------|
| | otor 1 Ryan H Swift | | |
| | First Name Middle Name Last Name | | |
| | otor 2 Jacqueline S Swift use if, filing) First Name Middle Name Last Name | | |
| | ted States Bankruptcy Court for the: DISTRICT OF NEVADA | | |
| Oili | ed States Bankruptcy Count for the. | | |
| | te number 16-12239 | □ Che | eck if this is an |
| (| | | ended filing |
| Su Be a | ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new Summary and check the box at the top of this page. | | |
| Par | Summarize Your Assets | | |
| | | | assets e of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 19,000.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | · · | · |
| | | \$ | 19,000.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | liabilities unt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_ | 24,113.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 130,721.99 |
| | | | |
| | Your total liabilities | \$ | 154,834.99 |
| | | | |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$_ | 4,174.69 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,130.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other ៖ | schedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a person | al, family, or |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this | s hox and | submit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 6 of 50

Debtor 1 Ryan H Swift
Debtor 2 Jacqueline S Swift Case number (if known) 16-12239

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 5,243.29

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | l claim |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 94,140.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 94,140.00 |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 7 of 50

| Debtor 1 Debtor 2 (Spouse, if filing) | tion to identify your Ryan H Swift First Name | case and this filing: | | | |
|--|--|--|---|--|--|
| Debtor 2 (Spouse, if filing) | | | | | |
| Debtor 2 (Spouse, if filing) | Firet Name | | | | |
| (Spouse, if filing) | Jacqueline S Sw | Middle Name | Last Name | | |
| United States Bankru | First Name | Middle Name | Last Name | | |
| | ruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Case number 16- | -12239 | | | | ☐ Check if this is an |
| Case number 10- | 12239 | | | | ☐ Check if this is an amended filing |
| | | | | | |
| Official Form | n 106A/B | | | | |
| _ | A/B: Prop | artv | | | 12/15 |
| | | | nce. If an asset fits in more than o | one category list the asset in | |
| nink it fits best. Be as | s complete and accura | ate as possible. If two marrie | d people are filing together, both a | are equally responsible for su | pplying correct |
| ntormation. It more sp Inswer every question | | a separate sheet to this form | n. On the top of any additional pag | ges, write your name and case | e number (If Known). |
| Part 1: Describe Eac | ch Residence. Building | a. Land. or Other Real Estate | You Own or Have an Interest In | | |
| | | <u></u> | | | |
| . Do you own or have | e any legal or equitabl | e interest in any residence, b | ouilding, land, or similar property? | | |
| No. Go to Part 2. | | | | | |
| ☐ Yes. Where is the | e property? | | | | |
| Part 2: Describe You | | | | | |
| o you own, lease, o omeone else drives. | or have legal or eq . If you lease a vehic | | nicles, whether they are registerale G: Executory Contracts and U | | ehicles you own that |
| o you own, lease, o omeone else drives. | or have legal or eq . If you lease a vehic | le, also report it on <i>Schedu</i> | le G: Executory Contracts and L | | ehicles you own that |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes | or have legal or eq . If you lease a vehic s, tractors, sport u | le, also report it on <i>Schedu</i> | ele G: Executory Contracts and L | | |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Doc | or have legal or eq . If you lease a vehic | le, also report it on Schedu tility vehicles, motorcycle Who has an intere | le G: Executory Contracts and L | Do not deduct secured club the amount of any secure | aims or exemptions. Put |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: | or have legal or eq . If you lease a vehic s, tractors, sport u dge ravan | le, also report it on <i>Schedu</i> | ele G: Executory Contracts and L | Do not deduct secured clithe amount of any secure Creditors Who Have Clair | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Model: Doc Car | or have legal or eq . If you lease a vehic ss, tractors, sport und dge ravan | le, also report it on <i>Schedu</i> tility vehicles, motorcycle Who has an intere | est in the property? Check one | Do not deduct secured club the amount of any secure | aims or exemptions. Put |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Door Model: Car Year: 201 | or have legal or eqi . If you lease a vehic s, tractors, sport u dge ravan 12 | Who has an intered Debtor 2 only Debtor 1 and D Debtor 1 and D | est in the property? Check one | Do not deduct secured cluthe amount of any secure Creditors Who Have Clair Current value of the | aims or exemptions. Put de claims on Schedule Doms Secured by Property. Current value of the |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Doo Model: Car Year: 201 Approximate mi | or have legal or eqi . If you lease a vehic s, tractors, sport u dge ravan 12 | Who has an interded Debtor 1 and Debtor 2 only | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured cluthe amount of any secure Creditors Who Have Clair Current value of the | aims or exemptions. Put de claims on Schedule Doms Secured by Property. Current value of the |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Door Model: Car Year: 201 Approximate mi Other information | or have legal or eqi . If you lease a vehic ss, tractors, sport us dge ravan 12 sileage: 90 on: | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D Debtor 1 and D Check if this is (see instructions) | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put and claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$12,500.00 |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Doo Model: Car Year: 201 Approximate mi Other information 3.2 Make: For | or have legal or eqi . If you lease a vehic ss, tractors, sport us dge ravan 12 aileage: 90 on: | Who has an interest of the second stillity vehicles, motorcycles who has an interest of the second s | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,500.00 Do not deduct secured clithe amount of any secure | aims or exemptions. Put the claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$12,500.00 |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Doo Model: Car Year: 201 Approximate mi Other information | or have legal or equal or equa | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D Debtor 1 and D Check if this is (see instructions) | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$12,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim | aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$12,500.00 aims or exemptions. Put id claims on Schedule D: ms Secured by Property. |
| Oo you own, lease, oomeone else drives. Cars, vans, trucks No Yes 3.1 Make: Car Year: 201 Approximate mi Other informatic | or have legal or eqi. If you lease a vehic s, tractors, sport ut dge ravan 12 sileage: 90 on: | Who has an interest of the property of the pro | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one | Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,500.00 Do not deduct secured clithe amount of any secure | aims or exemptions. Put the claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$12,500.00 |
| Oo you own, lease, comeone else drives. Cars, vans, trucks No Yes 3.1 Make: Car Year: 201 Approximate mi Other informatic Other informatic 3.2 Make: For Model: Foc Year: 200 | or have legal or eqi . If you lease a vehic ss, tractors, sport us dge ravan 12 sileage: 90 on: rd cus 05 sileage: 129 | Who has an intereduction of the contract of th | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$12,500.00 Do not deduct secured class amount of any secure Creditors Who Have Claim Current value of the | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$12,500.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |

Official Form 106A/B Schedule A/B: Property page 1

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 8 of 50

| | Pebtor 1 Ryan H Sw Debtor 2 Jacqueline | | 16-12239 |
|----|--|--|---|
| 5 | | of the portion you own for all of your entries from Part 2, including any entries for ched for Part 2. Write that number here=> | \$15,300.00 |
| Р | art 3: Describe Your Per | sonal and Household Items | |
| | | y legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Household goods and Examples: Major applied No ■ Yes. Describe | d furnishings ances, furniture, linens, china, kitchenware | |
| | Tes. Describe | | |
| | | Furniture | \$2,000.00 |
| 7. | | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of ell phones, cameras, media players, games | collections; electronic devices |
| | | Computer, electronics | \$1,000.00 |
| | other collect ■ No □ Yes. Describe Equipment for sports | and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| | musical ins ■ No □ Yes. Describe | | ,,,, |
| 10 | b. Firearms Examples: Pistols, rifl■ No□ Yes. Describe | les, shotguns, ammunition, and related equipment | |
| 11 | . Clothes Examples: Everyday No Yes. Describe | clothes, furs, leather coats, designer wear, shoes, accessories | |
| | | Clothing, shoes, coats | \$500.00 |
| 12 | Jewelry Examples: Everyday No Yes. Describe | jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | gold, silver |
| 13 | B. Non-farm animals Examples: Dogs, cats No ☐ Yes. Describe | s, birds, horses | |
| 14 | | and household items you did not already list, including any health aids you did not list | |
| | ☐ Yes. Give specific i | | _ |
| Of | ficial Form 106A/B | Schedule A/B: Property | page 2 |

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Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 9 of 50

| Debt Debt | | Ryan H Swift Jacqueline S Swift | Case number (if known) | 16-12239 |
|--------------|--------------------------------|--|--|---|
| 15. | | he dollar value of all of your entries from Part 3, includ art 3. Write that number here | | \$3,500.00 |
| Part Do y | | scribe Your Financial Assets vn or have any legal or equitable interest in any of the f | following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Examp] No | oles: Money you have in your wallet, in your home, in a safe | | |
| | | | Cash | \$0.00 |
| | Examp | its of money ides: Checking, savings, or other financial accounts; certific institutions. If you have multiple accounts with the san | | ouses, and other similar |
| | | 17.1. Checking Chas | se Bank | \$200.00 |
| 19. N | Examp No Yes Non-pu joint vo | mutual funds, or publicly traded stocks bles: Bond funds, investment accounts with brokerage firms Institution or issuer name: ublicly traded stock and interests in incorporated and uenture Give specific information about them | | in an LLC, partnership, and |
| | Negoti Non-ne No | nment and corporate bonds and other negotiable and nable instruments include personal checks, cashiers' checks egotiable instruments are those you cannot transfer to some Give specific information about them Issuer name: | s, promissory notes, and money orders. | |
| | Examp I No | nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift s List each account separately. Type of account: Institu | savings accounts, or other pension or profit-sharing put | olans |
| | Your sl | ty deposits and prepayments hare of all unused deposits you have made so that you ma loles: Agreements with landlords, prepaid rent, public utilities | | es, or others |
| | | | ution name or individual: | |
| | No | ies (A contract for a periodic payment of money to you, eith Issuer name and description. | ner for life or for a number of years) | |

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.Official Form 106A/BSchedule A/B: Property

| | ebtor 1 ebtor 2 | Ryan H Swift Jacqueline S Swift | | Case number (if known) | 16-12239 |
|-----|--------------------|---|--|--|---|
| | 26 U.S. | C. §§ 530(b)(1), 529A(b), and 529(| (b)(1). | | |
| | ■ No | 1 22 2 | | | |
| | ☐ Yes | Institution name and | d description. Separately file the records of | if any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts, | , equitable or future interests in | property (other than anything listed in | line 1), and rights or powers exe | cisable for your benefit |
| | ■ No | | | | |
| | ⊔ Yes. | Give specific information about th | em | | |
| 26. | Examp | | secrets, and other intellectual property ites, proceeds from royalties and licensing | | |
| | ■ No □ Yes. | Give specific information about th | em | | |
| 27. | Examp | es, franchises, and other general oles: Building permits, exclusive lic | al intangibles enses, cooperative association holdings, | iquor licenses, professional license | s |
| | ■ No □ Yes. | Give specific information about th | em | | |
| M | oney or | property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | funds owed to you | | | |
| | □ No | and oned to you | | | |
| | Yes. | Give specific information about the | em, including whether you already filed the | e returns and the tax years | |
| | | | | | - |
| | | | | | |
| | | | 2016 tax refund | Federal | Unknown |
| | Examp ■ No | support oles: Past due or lump sum alimony Give specific information | y, spousal support, child support, mainten | ance, divorce settlement, property | settlement |
| 30. | Examp | amounts someone owes you oles: Unpaid wages, disability insur benefits; unpaid loans you ma | ance payments, disability benefits, sick pade to someone else | ay, vacation pay, workers' compen | sation, Social Security |
| | ■ No | | | | |
| | ⊔ Yes. | Give specific information | | | |
| 31. | Examp | ets in insurance policies boles: Health, disability, or life insura | ance; health savings account (HSA); credi | t, homeowner's, or renter's insuran | ce |
| | ■ No □ Yes | Name the insurance company of e | each policy and list its value | | |
| | — 103. | Company na | | Beneficiary: | Surrender or refund value: |
| 32. | If you a | terest in property that is due you are the beneficiary of a living trust, one has died. | from someone who has died expect proceeds from a life insurance pol | icy, or are currently entitled to rece | ive property because |
| | ■ No | Cive enceific information | | | |
| | ⊔ res. | Give specific information | | | |
| 33. | | | r not you have filed a lawsuit or made ates, insurance claims, or rights to sue | a demand for payment | |
| | ■ No | | | | |
| | | Describe each claim | | | |

Official Form 106A/B Schedule A/B: Property page 4

| Debto | • | | Case number (if known) | 16-12239 |
|------------------------------|--|----------------------------|-----------------------------|--------------------------|
| | ther contingent and unliquidated claims of every nature, include | ding counterclaims | of the debtor and rights to | set off claims |
| | | | | |
| | Yes. Describe each claim | | | |
| 35. A ı | ny financial assets you did not already list | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| | Add the dollar value of all of your entries from Part 4, including or Part 4. Write that number here | | es you have attached | \$200.00 |
| Part 5 | Describe Any Business-Related Property You Own or Have an Interes | est In. List any real esta | ate in Part 1. | |
| 37. Do | you own or have any legal or equitable interest in any business-relate | d property? | | |
| | Io. Go to Part 6. | | | |
| ΠY | es. Go to line 38. | | | |
| Part 6 46. D 6 | Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- | | | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| | | | | |
| Part 7 | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | o you have other property of any kind you did not already list? examples: Season tickets, country club membership | , | | |
| | No Yes. Give specific information | | | |
| | res. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write tha | at number here | | \$0.00 |
| | | | | |
| Part 8 | List the Totals of Each Part of this Form | | | |
| 55. I | Part 1: Total real estate, line 2 | | | \$0.00 |
| | Part 2: Total vehicles, line 5 | \$15,300.00 | | |
| | Part 3: Total personal and household items, line 15 | \$3,500.00 | | |
| | Part 4: Total financial assets, line 36 | \$200.00 | | |
| 59. I | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. I | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. I | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$19,000.00 | Copy personal property to | otal \$19,000.0 0 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$19,000.00 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this info | rmation to identify your | case: | | | | |
|----------------------|--|-------------|-----------|---|---------------------|--|
| Debtor 1 | Ryan H Swift | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Jacqueline S Swi | ft | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | United States Bankruptcy Court for the: DISTRICT OF NEVADA | | | _ | | |
| Case number 16-12239 | | | | | | |
| (if known) | | | | _ | Check if this is an | |
| | | | | | amended filing | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 2012 Dodge Caravan 90,000 miles | \$12,500.00 | • | \$1.00 | Nev. Rev. Stat. § 21.090(1)(f) |
| Ente from dericable PAB. 4.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2005 Ford Focus 129,000 miles Line from Schedule A/B: 3.2 | \$2,800.00 | | \$2,800.00 | Nev. Rev. Stat. § 21.090(1)(f) |
| Ellie IIIIII Schedule AVD. 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Furniture Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Line from Schedule AVD. V.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Computer, electronics Line from Schedule A/B: 7.1 | \$1,000.00 | | \$1,000.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Ellie II oli i ochedate 242. TT | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing, shoes, coats | \$500.00 | | \$500.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| LINE HOITI SCHEUUIE PVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing, shoes, coats Line from Schedule A/B: 11.1 | \$500.00 | | 100% of fair market value, up to | Nev. Rev. Stat. § 21.09 |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 13 of 50

| | btor 1 btor 2 | Ryan H Swift Jacqueline S Swift | | | Case number (if known) | 16-12239 |
|----|------------------|--|--------------------------------------|---------|---|------------------------------------|
| | | description of the property and line on dule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | | cking: Chase Bank from Schedule A/B: 17.1 | \$200.00 | | \$200.00 | Nev. Rev. Stat. § 21.090(1)(g) |
| | LIIIG | Hom Schedule AVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | eral: 2016 tax refund | Unknown | | Unknown | Nev. Rev. Stat. § 21.090(1)(aa) |
| | LINE | IIIIII Scriedule PVB. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | eral: 2016 tax refund | Unknown | | \$2,000.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| | LIIIG | Hom Schedule AVD. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | (Sub | you claiming a homestead exemption ject to adjustment on 4/01/19 and every | | | ed on or after the date of adjustmen | t.) |
| | | Yes. Did you acquire the property cover | ed by the exemption wi | thin 1, | 215 days before you filed this case? | |
| | | □ No | | | | |
| | | ☐ Yes | | | | |

| Ca | ise 16-1223 | 39-mkn Doc 12 Entered 05/06 | /16 16:58:42 | Page 14 of 50 | |
|---|------------------------|---|-------------------------|-------------------------|---------------|
| Fill in this information | n to identify yoເ | ır case: | | | |
| Debtor 1 R | yan H Swift | | | | |
| | | Middle Name Last Name | | | |
| | | | | | |
| (Spouse if, filing) Fire | st Name | Middle Name Last Name | | | |
| United States Bankrup | tcy Court for the | DISTRICT OF NEVADA | | | |
| Case number 16-12 | 2239 | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | ameno | led filing |
| Official Form 10 | neD | | | | |
| | | \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ | | | |
| Schedule D: | Creditors | Who Have Claims Secured | by Property | <u>/</u> | 12/15 |
| Fill in this information to identify your case: Debtor 1 Ryan H Swift First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEVADA Case number (if known) Check if this is an amended filing Official Form 106D | | | | | |
| | tional Page, fill it | out, number the entries, and attach it to this form. On | the top of any addition | al pages, write your na | me and case |
| , | claims secured b | y your property? | | | |
| | • | • • • | u have nothing else to | report on this form. | |
| _ | | • | J | • | |
| | | bolow. | | | |
| <u> </u> | | | Column A | Column B | Column C |
| | | | | | Unsecured |
| | | | Do not deduct the | that supports this | portion |
| 2.1 Sce Fcu | | Describe the property that secures the claim: | | | |
| | | | ΨΞ 1,1 10100 | <u> </u> | 411,010.00 |
| | | , | | | |
| | evention | As of the date you file, the claim is: Check all that | | | |
| | 01724 | apply. | | | |
| | | _ | | | |
| Number, Street, City, S | state & ZIP Code | _ ` | | | |
| Who owes the debt? | Check one. | • | | | |
| Debtor 1 only | | | ured | | |
| ■ Debtor 2 only | | car loan) | | | |
| _ | 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the deb | otors and another | ☐ Judgment lien from a lawsuit | | | |
| | elates to a | Other (including a right to offset) | | | |
| Date debt was incurred | 9/01/14 Last Active | Last 4 digits of account number 1401 | | | |
| | | <u> </u> | | | |
| | | | | | |
| Add the dollar value of | f your entries in C | olumn A on this page. Write that number here: | \$24,11 | 3.00 | |
| | | the dollar value totals from all pages. | \$24,11 | 3.00 | |

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 15 of 50

| | Odsc 10 12200 mm | Doo 12 Entered 00/0 | 0/10 10:00:42 Tage 10 | 01 00 |
|-----------------------------------|--|--|---|-----------------------------|
| Fill in t | this information to identify your case: | | | |
| Debtor | 1 Pyon H Swift | | | |
| Debtoi | - tryum tr | lle Name Last Name | | |
| Debtor | 2 Jacqueline S Swift | | | |
| (Spouse i | if, filing) First Name Midd | lle Name Last Name | | |
| United | States Bankruptcy Court for the: DISTRIC | CT OF NEVADA | | |
| Case n | number 16-12239 | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| O.(| . I. E 400E/E | | | |
| | al Form 106E/F | | | 4044 |
| Sche | dule E/F: Creditors Who Hav | ve Unsecured Claims | | 12/15 |
| Schedule left. Atta name an | e G: Executory Contracts and Unexpired Leases e D: Creditors Who Have Claims Secured by Pro ich the Continuation Page to this page. If you ha did case number (if known). | perty. If more space is needed, copy ve no information to report in a Part, | the Part you need, fill it out, number the | entries in the boxes on the |
| Part 1: | | | | |
| | any creditors have priority unsecured claims ag | ainst you? | | |
| | No. Go to Part 2. | | | |
| | Yes. | | | |
| Part 2: | List All of Your NONPRIORITY Unsecu | red Claims | | |
| 3. Do | any creditors have nonpriority unsecured claims | s against you? | | |
| | No. You have nothing to report in this part. Submit t | this form to the court with your other scho | edules. | |
| | Yes. | | | |
| 4. List | t all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other | aim. For each claim listed, identify what | type of claim it is. Do not list claims already | included in Part 1. If more |
| Par | | ordanore in r art our you have more than | Tarres nonpriority and odd odd in our | and Continuation 1 age of |
| | | | | Total claim |
| 4.1 | Amex | Last 4 digits of account number | 6003 | \$0.00 |
| | Nonpriority Creditor's Name | | Onemad C/04/40 Leat Active | |
| | Correspondence Po Box 981540 | When was the debt incurred? | Opened 6/01/10 Last Active 9/01/10 | |
| | El Paso, TX 79998 | | 0/01/10 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did no | ot |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharir | • | |
| | Yes | Other. Specify Credit Card | 1 | |

| | 1 Ryan H Swift 2 Jacqueline S Swift | | Case number (if know) 16-12239 | | | |
|-----|---|--|--|--------|--|--|
| | Amex | Last 4 digits of account number | 6183 | \$0.00 | | |
| | Nonpriority Creditor's Name Correspondence Po Box 981540 El Paso, TX 79998 | When was the debt incurred? | Opened 6/15/10 Last Active 8/11/10 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only | As of the date you file, the claim | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.3 | Carmax Auto Finance Nonpriority Creditor's Name | Last 4 digits of account number | 6516 | \$0.00 | | |
| | Po Box 440609 Kennesaw, GA 30160 | When was the debt incurred? | Opened 2/01/14 Last Active 2/01/14 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent | | | | |
| | | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | | | | |
| | Yes | Other. Specify Automobile | Other. Specify Automobile | | | |
| 4.4 | Chase Auto Finance Nonpriority Creditor's Name | Last 4 digits of account number | 1187 | \$0.00 | | |
| | National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004 | When was the debt incurred? | Opened 8/01/05 Last Active 1/25/11 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharir | g plans, and other similar debts | | | |
| | ☐ Yes | ■ Other. Specify Automobile | | | | |
| | □ 169 | Other. Specify | <u> </u> | | | |

| Debtor Debtor | r 1 Ryan H Swift r 2 Jacqueline S Swift | | | | |
|------------------|---|--|--|------------|--|
| 4.5 | Chase Card Services | Last 4 digits of account number | 3008 | \$6,409.00 | |
| | Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim | Opened 10/01/09 Last Active 1/11/16 | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim | 5. Опеск ан шасарріу | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent | | | |
| | Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | |
| | Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |
| 4.6 | Citibank/Best Buy Nonpriority Creditor's Name | Last 4 digits of account number | 4018 | \$1,034.00 | |
| | Centalized Bankruptcy/Citicorp Credit Se Po Box 790040 | When was the debt incurred? | Opened 12/01/13 Last Active 1/04/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | . Gain. | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Charge Acc | count | | |
| 4.7 | Citibank/Shell Oil | Last 4 digits of account number | 4616 | \$0.00 | |
| | Nonpriority Creditor's Name Citibank/Citicorp Srvs Attn: Centralized Po Box 790040 | When was the debt incurred? | Opened 10/04/09 Last Active 10/08/10 | | |
| | St Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | |
| | ■ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 18 of 50

| | r 1 Ryan H Swift r 2 Jacqueline S Swift | | Case number (if know) 16-12239 | | | | |
|-----|---|--|--|-------------|--|--|--|
| | Comenity Bank/vctrssec | Last 4 digits of account number | 9757 | \$0.00 | | | |
| | Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 1/01/06 Last Active 8/12/12 | | | | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | |
| | Debtor 1 only | ☐ Contingent | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | |
| 4.9 | Dept Of Ed/NeInet Nonpriority Creditor's Name | Last 4 digits of account number | 2892 | \$20,924.00 | | | |
| | Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 1/01/14 Last Active 3/10/16 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify | | | | | |
| 4.1 | | Educations | | | | | |
| 0 | Dept Of Ed/Nelnet | Last 4 digits of account number | 2992 | \$17,970.00 | | | |
| | Nonpriority Creditor's Name Attn: Claims Po Box 82505 | When was the debt incurred? | Opened 1/01/14 Last Active 3/10/16 | | | | |
| | Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other. Specify | | | | | |
| | | Educationa | ıl | | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 19 of 50

| | 1 Ryan H Swift 2 Jacqueline S Swift | | Case number (if know) 16-12239 | |
|---|---|---|--|------------|
| | Dept Of Ed/Nelnet | Last 4 digits of account number | 3899 | \$9,160.00 |
| | Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 10/01/10 Last Active 12/17/13 | |
| _ | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | Other. Specify | | |
| | | Educationa | l | |
| - | Dept Of Ed/Nelnet | Last 4 digits of account number | 3799 | \$8,586.00 |
| | Nonpriority Creditor's Name Attn: Claims Po Box 82505 | When was the debt incurred? | Opened 8/01/10 Last Active 12/17/13 | |
| = | Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | Educationa | l | |
| _ | Dept Of Ed/NeInet Nonpriority Creditor's Name | Last 4 digits of account number | 4099 | \$7,471.00 |
| | Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 9/01/12 Last Active 12/17/13 | |
| - | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | Lalaina | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | ı cıaım: | |
| | Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debte | |
| | ■ No | <u> </u> | y pians, and other similal debts | |
| | Yes | Other. Specify | | |

| | Ryan H Swift Jacqueline S Swift | | Case number (if know) 16-12239 | |
|-------|---|---|--|------------|
| I T I | Dept Of Ed/NeInet Nonpriority Creditor's Name | Last 4 digits of account number | 3999 | \$5,594.00 |
| F | Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 9/01/12 Last Active 12/17/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| [| Debtor 2 only | ☐ Unliquidated | | |
| [| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| [| At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| [| ☐ Check if this claim is for a community | Student loans | | |
| c | lebt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ı | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| [| ☐Yes | Other. Specify | | |
| | | Educationa | l | |
| 1 × 1 | Dept Of Ed/Nelnet | Last 4 digits of account number | 3599 | \$3,520.00 |
| F | Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 12/01/08 Last Active 12/17/13 | |
| 1 | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ı | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| _ | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| _ | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| c | debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| [| ☐ Yes | Other. Specify | | |
| | | Educationa | I | |
| _ | Dept Of Ed/NeInet Nonpriority Creditor's Name | Last 4 digits of account number | 3699 | \$2,751.00 |
| F | Attn: Claims Po Box 82505 Lincoln, NE 68501 | When was the debt incurred? | Opened 8/01/09 Last Active 12/17/13 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| V | Who incurred the debt? Check one. | | | |
| ı | Debtor 1 only | ☐ Contingent | | |
| [| Debtor 2 only | Unliquidated | | |
| [| Debtor 1 and Debtor 2 only | ☐ Disputed | Labeta. | |
| [| At least one of the debtors and another | Type of NONPRIORITY unsecured | ı cıaım: | |
| | ☐ Check if this claim is for a community | Student loans | ration agreement or diverse that you did not | |
| | s the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| [| Yes | Other. Specify | | |

| | or 1 Ryan H Swift Or 2 Jacqueline S Swift | | Case number (if know) 16-12239 | |
|----------|--|--|--|------------|
| 4.1 7 | Discover Bank/glelsi | Last 4 digits of account number | 4517 | Unknown |
| | Nonpriority Creditor's Name 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 9/01/08 Last Active 5/20/12 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ☐ Other. Specify | | |
| | | Educationa | II | |
| 4.4 | | | | |
| 4.1 8 | Dscvr/glelsi | Last 4 digits of account number | 4517 | \$0.00 |
| | Nonpriority Creditor's Name 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 9/08/08 Last Active 5/20/12 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | d alatan | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | a ciaim: | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ No | report as priority claims ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | Educationa | ıl | |
| 4.1 9 | Joe Slyman Nonpriority Creditor's Name | Last 4 digits of account number | | \$3,825.99 |
| | 170 S. Green Valley Henderson, NV 89012 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Residential | Lease Liability | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 22 of 50

| Debtor Debtor | 1 Ryan H Swift 2 Jacqueline S Swift | | Case number (if know) 16-12239 | |
|------------------|--|--|--|------------|
| 4.2 | Kohls/Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 2079 | \$1,145.00 |
| | Po Box 3120 Milwaukee, WI 53201 | When was the debt incurred? | Opened 12/01/10 Last Active 11/03/15 | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | · · | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.2 | Montevista Hospital | Last 4 digits of account number | 3001;2 | Unknown |
| | Nonpriority Creditor's Name PO Box 840999 Dallas, TX 75284 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Medical | | |
| 4.2 | Rc Willey Home Furnishings | Last 4 digits of account number | 7079 | \$1,145.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 410429 | When was the debt incurred? | Opened 7/01/15 Last Active 11/03/15 | |
| | Salt Lake City, UT 84141 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | , , , , , , , , , , , , , , | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 23 of 50

| Sallie Mae Nonpriority Creditor's Name Attn: Navient Po Box 9500 | | | |
|--|--|---|------------|
| | Last 4 digits of account number | 0908 | \$0.00 |
| | | Opened 9/01/08 Last Active | |
| Po Box 9500 | When was the debt incurred? | 3/12/14 | |
| Wilkes-Barr, PA 18873 Number Street City State Zlp Code | As of the data you file, the claim | | |
| Who incurred the debt? Check one. | As of the date you file, the claim | s: Cneck all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | · | יש איניים, מוום טווטו אוווומו עבטנט | |
| Yes | Other. Specify | NI . | |
| | Educationa | 11 | |
| SBH Montevista Hospital Nonpriority Creditor's Name | Last 4 digits of account number | 3001;2 | \$1,416.00 |
| 5900 W. Rochelle Ave Las Vegas, NV 89103 | When was the debt incurred? | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Medical | | |
| Syncb/ashley Homestore | Last 4 digits of account number | 4645 | \$1,801.00 |
| Nonpriority Creditor's Name Attn: Bankrupty | _ | Opened 9/01/15 Last Active | |
| Po Box 103104 | When was the debt incurred? | 4/17/16 | |
| Roswell, GA 30076 | _ | | |
| Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | a ciaim: | |
| Check if this claim is for a community debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharin | | |
| Yes | ■ Other. Specify Charge Acc | count | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 24 of 50

| Synchrony Bank/ Old Navy Nonpriority Creditor's Name | | | |
|---|--|---|----------|
| Nonpriority Creditor's Name | Last 4 digits of account number | 4755 | \$464.00 |
| Attn: Bankruptcy Po Box 103104 Roswell, GA 30076 | When was the debt incurred? | Opened 7/01/15 Last Active 1/11/16 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | · | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| Synchrony Bank/Amazon | Last 4 digits of account number | 2397 | \$0.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | _ | Opened 12/01/15 Last Active | |
| Po Box 103104 Roswell, GA 30076 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim in | 3/01/16 | |
| Who incurred the debt? Check one. | 7.5 07 11.0 01.11.0 7.01 11.0 7.11.0 7.11.0 | er chook an mat apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| □ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Charge Acc | count | |
| Synchrony Bank/Gap | Last 4 digits of account number | 3588 | \$0.00 |
| Nonpriority Creditor's Name Attn: Bankrupty Po Box 103104 | When was the debt incurred? | Opened 4/07/04 Last Active 7/20/06 | |
| Roswell, GA 30076 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | Пол | | |
| _ | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 25 of 50

| Synchrony Bank/Walmart | Last 4 digits of account number | 5095 | \$3,663.00 | | |
|--|--|---|--------------|--|--|
| Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 10/01/14 Last Active | | | |
| Po Box 103104 | When was the debt incurred? | 1/11/16 | | | |
| Roswell, GA 30076 | A control of the state of the s | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | As of the date you file, the claim is: Check all that apply | | | |
| Debtor 1 only | Continuent | | | | |
| ■ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| _ | Student loans | a Gain | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | <u></u> | aration agreement or divorce that you did not | | | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | | | |
| ☐ Yes | Other. Specify Credit Card | | | | |
| | | 4000 | | | |
| Target Nonpriority Creditor's Name | Last 4 digits of account number | 4903 | \$0.0 | | |
| C/O Financial & Retail Services | | Opened 2/01/11 Last Active | | | |
| Mailstop BT PO Box 9475 | When was the debt incurred? | 3/11/15 | | | |
| Minneapolis, MN 55440 Number Street City State Zlp Code | As of the date you file, the claim | is. Check all that apply | | | |
| Who incurred the debt? Check one. | As of the date you me, the dam's | is. Oncor an that apply | | | |
| ☐ Debtor 1 only | Counting word | | | | |
| Debtor 2 only | ☐ Contingent | | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | |
| ■ Check if this claim is for a community | ☐ Student loans | a Gain | | | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offset? | | | | | |
| ■ No | | | | | |
| Yes | ■ Other. Specify Credit Card | l | | | |
| TD Auto Financial | Last 4 digits of account number | 6702 | \$0.0 | | |
| Nonpriority Creditor's Name | _ | | - | | |
| Td Auto Finance Po Box 551080 | When was the debt incurred? | Opened 3/01/12 Last Active | | | |
| Jacksonville, FL 32255 | when was the dept incurred? | 9/25/14 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| Who incurred the debt? Check one. | | | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ■ Debtor 1 and Debtor 2 only | Disputed | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| ■ Check if this claim is for a community | ☐ Student loans | | | | |
| debt | | aration agreement or divorce that you did not | | | |
| Is the claim subject to offset? | report as priority claims | | | | |
| No | Debts to pension or profit-sharing | - : | | | |
| Yes | Other. Specify Automobile | e | | | |
| | | | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 26 of 50

| Uheaa | Last 4 digits of account number | 0001 | \$0.00 | |
|---|--|---|------------|--|
| Nonpriority Creditor's Name Po Box 145110 Salt Lake City, UT 84114 | When was the debt incurred? | Opened 1/03/07 Last Active 3/10/14 | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ■ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| □ Yes | Other. Specify | | | |
| | Educationa | ıl | | |
| Us Dept Of Ed/glelsi | Last 4 digits of account number | 7581 | \$18,164.0 | |
| Nonpriority Creditor's Name Po Box 7860 Madison, WI 53707 | When was the debt incurred? | Opened 3/01/14 Last Active 9/22/15 | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | is: Check all that apply | | |
| Who incurred the debt? Check one. | _ | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | | | |
| At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | | |
| No | Debts to pension or profit-sharin | | | |
| ■ No □ Yes | ☐ Other. Specify | g plans, and other similar debts | | |
| La res | Educationa | .l | | |
| Us Dept of Ed/Great Lakes Educational Lo | Last 4 digits of account number | 7577 | \$0.0 | |
| Nonpriority Creditor's Name 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 8/01/09 Last Active 3/10/14 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| ☐ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? — | report as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| ☐ Yes | ☐ Other. Specify | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 27 of 50

| Ryan H Swift Jacqueline S Swift | | Case number (if know) 16-12239 | | |
|--|---|---|--------|--|
| Us Dept of Ed/Great Lakes Educational Lo | Last 4 digits of account number | 8581 | \$0.00 | |
| Nonpriority Creditor's Name 2401 International Madison, WI 53704 | When was the debt incurred? | Opened 1/01/11 Last Active 3/10/14 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | State Zlp Code As of the date you file, the claim is: Check all the | | | |
| ☐ Debtor 1 only | ☐ Contingent | | | |
| ■ Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| □ Yes | Other. Specify | | | |
| | Educationa | | | |
| US Dept of Education | Last 4 digits of account number | 2899 | \$0.0 | |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 | When was the debt incurred? | Opened 10/13/10 Last Active 3/19/12 | | |
| Saint Paul, MN 55116 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| ☐ Yes | Other. Specify | | | |
| | Educationa | al . | | |
| US Dept of Education | Last 4 digits of account number | 2599 | \$0.0 | |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 | When was the debt incurred? | Opened 12/22/08 Last Active 3/19/12 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ Type of NONPRIORITY uns | | | | |
| | | d claim: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| ☐ Yes | Other. Specify | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 28 of 50

| | 1 Ryan H Swift 2 Jacqueline S Swift | Case number (if know) 16-12239 | | | | | |
|-------|--|---|--|--------------|--|--|--|
| | | | · · · · · · | | | | |
| 1 U | US Dept of Education | Last 4 digits of account number | 2799 | \$0.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 8/13/10 Last Active | | | | |
| | Po Box 16448 | When was the debt incurred? | 3/19/12 | | | | |
| | Saint Paul, MN 55116 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | _ | ☐ Contingent | | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | | |
| | Debtor 2 only | _ | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | | | | |
| | At least one of the debtors and another | Student loans | · oranii. | | | | |
| | ☐ Check if this claim is for a community debt | _ | | | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No □ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | □ Yes | | | | | | |
| | ☐ Yes ☐ Other. Specify Educational | | | | | | |
| 4.3 | US Dont of Education | | 2699 | 20.00 | | | |
| ı • ı | US Dept of Education Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 | | | |
| | Attn: Bankruptcy | | Opened 8/14/09 Last Active | | | | |
| | Po Box 16448 | When was the debt incurred? | 3/19/12 | | | | |
| | Saint Paul, MN 55116 Number Street City State Zlp Code | As of the date you file the claim i | e: Chook all that apply | | | | |
| | Who incurred the debt? Check one. | 11.7 | | | | | |
| | ■ Debtor 1 only □ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | | | |
| | Check if this claim is for a community | ■ Student loans | | | | | |
| | debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | and a disconnection and see that yet and not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| | | Educational | | | | | |
| 4.4 | US Dept of Education | Last 4 digits of account number | 3599 | \$0.00 | | | |
| 1 U | Nonpriority Creditor's Name | | | Ψ0.00 | | | |
| | Attn: Bankruptcy | | Opened 9/04/12 Last Active | | | | |
| | Po Box 16448 | When was the debt incurred? | 1/16/13 | | | | |
| | Saint Paul, MN 55116 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | , | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | |
| | ☐ At least one of the debtors and another | l claim: | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt | | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| | | Educationa | I | | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 29 of 50

| Debtor Debtor | 1 Ryan H Swift 2 Jacqueline S Swift | | Case number (if know) 16-12239 | | |
|------------------|--|---|--|--------|--|
| 4.4 1 | US Dept of Education | Last 4 digits of account number | 3699 | \$0.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 | When was the debt incurred? | Opened 9/14/12 Last Active 1/16/13 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | <u> </u> | ☐ Unliquidated | | | |
| | Debtor 2 only | ☐ Disputed | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | | |
| | At least one of the debtors and another | Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | □Yes | Other. Specify | | | |
| | | Educationa | | | |
| 4.4 2 | US Dept of Education Nonpriority Creditor's Name | Last 4 digits of account number | 5921 | \$0.00 | |
| | Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116 | When was the debt incurred? | Opened 12/22/08 Last Active 2/08/11 | | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. | Street City State Zlp Code As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Student loansObligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | ☐ Other. Specify | g plane, and other ominal dobto | | |
| | □ res | | | | |
| 4.4 | Wells Fargo Nonpriority Creditor's Name | Last 4 digits of account number | 0001 | \$0.00 | |
| | Wells Fargo Bank Mac X2505-033 Pob 10438 Des Moines, IA 50306 | When was the debt incurred? | Opened 12/01/06 Last Active 12/27/06 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | l claim: | | | |
| | ☐ Check if this claim is for a community | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify | | | |
| | | Educationa | I | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 30 of 50

| | or 1 Ryan H Swift or 2 Jacqueline S Swift | | Case number (if know) 16-12239 | | | | |
|----------|--|--|---|------------|--|--|--|
| 4.4 4 | Wells Fargo Bank Nv Na | Last 4 digits of account number | 0001 | \$7,580.00 | | | |
| | Nonpriority Creditor's Name | | Opened 9/01/15 Last Active | | | | |
| | 1 Home Campus X2303-01a Des Moines, IA 50326 | When was the debt incurred? | 11/10/15 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Note Loan | | | | | |
| 4.4 | Wells Fargo Card Services | Last 4 digits of account number | 5424 | \$5,047.00 | | | |
| | Nonpriority Creditor's Name | _ | | | | | |
| | Mac F82535-02f Po Box 10438 | When was the debt incurred? | Opened 8/01/03 Last Active 1/15/16 | | | | |
| | Des Moines, IA 10438 | when was the dept incurred? | 1/13/16 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. As of the date you file, the claim | | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | ☐ Obligations arising out of a sepa | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | |
| 4.4 | Wells Fargo Card Services | Last 4 digits of account number | 9389 | \$3,052.00 | | | |
| | Nonpriority Creditor's Name Mac F82535-02f Po Box 10438 | When was the debt incurred? | Opened 1/01/07 Last Active 1/31/16 | | | | |
| | Des Moines, IA 10438 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | , | э энгэн энг эррү | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | | | | |
| | ☐ Check if this claim is for a community ☐ Student loans | | | | | | |
| | debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other. Specify Credit Card | rd | | | | |
| | | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Ryan H Swift
Debtor 2 Jacqueline S Swift

Case number (if know)

16-12239

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 94,140.00 |
| Total claims | | | | |
| rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 36,581.99 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 130,721.99 |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 32 of 50

| Fill in this inform | nation to identify your | case: | | |
|-----------------------------|-------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | Ryan H Swift | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 Jacqueline S Swift | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | DISTRICT OF NEVADA | | |
| | 6-12239 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with Name, Number | whom you have the , Street, City, State and ZIP | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|---------------------|---|
| 2.1 | | · | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | Ony | | Oldio | 211 0000 | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |

| Fill in this | s information to identify | your case: | | |
|--------------------------|--|--|---|--|
| Debtor 1 | Ryan H Swift | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Jacqueline S | Swift | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | |
| United St | ates Bankruptcy Court for t | he: DISTRICT OF NEVADA | | |
| | | | | |
| Case nun | nber 16-12239 | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| o | . = | | | |
| Officia | al Form 106H | | | |
| Sche | dule H: Your C | odebtors | | 12/15 |
| | | | | |
| 1. Do No Ye 2. Wi Arizo | e and case number (if kn you have any codebtors s thin the last 8 years, have na, California, Idaho, Louis c. Go to line 3. | own). Answer every question. ? (If you are filing a joint case, do | not list either spouse perty state or territor to Rico, Texas, Wash | ry? (Community property states and territories include |
| | In which community | state or territory did you live? | -NONE- | . Fill in the name and current address of that person. |
| in lin | Number, Street, City, State of Number, City, S | debtors. Do not include your sponly if that person is a guaranto | r or cosigner. Make | r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici |
| | ı 106D), Schedule E/F (Of Column 2. | ficial Form 106E/F), or Schedule | e G (Official Form 10 | 06G). Use Schedule D, Schedule E/F, or Schedule G to |
| | | | | |
| | Column 1: Your codebto Name, Number, Street, City, State | | | Column 2: The creditor to whom you owe the debt |
| | Marile, Number, Street, City, State | and ZIF Code | | Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| 0.1 | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | | | | |
| | Number Street | 0 | 710.0 | |
| | City | State | ZIP Code | |
| | | | | |
| 3.2 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | | | | |
| | Number Street | Stato | 710 0000 | |
| | City | State | ZIP Code | |

| Fill in this information to identify your case: | | |
|---|-----------------|--|
| Debtor 1 Ryan H Swift | | |
| Debtor 2 Jacqueline S Swift (Spouse, if filing) | | |
| United States Bankruptcy Court for the: DIS | TRICT OF NEVADA | |
| Case number (If known) 16-12239 | | Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Form 106l | | 13 income as of the following date: |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t1: Describe Employment | | | | |
|-----|---|----------------------|----------------|-----------------------------|---------------------------------|
| 1. | Fill in your employment information. | | Debto | ·1 | Debtor 2 or non-filing spouse |
| | If you have more than one job, | Employment status* | ■ Em | oloyed | ☐ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not | employed | ■ Not employed |
| | employers. | Occupation | Appre | entice | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Helix Electric | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | nset Way erson, NV 89014 | |
| | | How long employed th | ere? | 1 year | |
| | | | | | ditional Employment Information |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 2,513.33 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 2,513.33 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

| | otor 1 otor 2 | Ryan H Swift Jacqueline S Swift | | C | Case | number (if known) | 16-1 | 2239 | | |
|-----|--|---|------|----|---------|-------------------|----------|---------------------------------|----------------------|-------|
| | | | | | | Debtor 1 | | r Debtor 2 or n-filing spous | | |
| | Сор | y line 4 here | 4. | | \$_ | 2,513.33 | \$_ | 0. | 00 | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 185.64 | \$ | 0. | 00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b | ٠. | \$ | 0.00 | \$ | | 00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$ | 0. | 00 | |
| | 5d. | Required repayments of retirement fund loans | 5d | ١. | \$ | 0.00 | \$ | 0. | 00 | |
| | 5e. | Insurance | 5e | ٠. | \$ | 0.00 | \$ | 0. | 00 | |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | 0. | 00 | |
| | 5g. | Union dues | 5g | ١. | \$ | 0.00 | \$ | 0. | 00 | |
| | 5h. | Other deductions. Specify: | _ 5h | .+ | \$_ | 0.00 | + \$ | 0. | 00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 185.64 | \$_ | 0. | 00 | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 2,327.69 | \$_ | 0. | 00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | _ | | | |
| | | monthly net income. | 8a | ١. | \$_ | 0.00 | \$_ | 0. | 00 | |
| | 8b. | Interest and dividends | 8b | ٠. | \$_ | 0.00 | \$ | 0. | 00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | 0 | 00 | |
| | 8d. | Unemployment compensation | 8d. | | \$ - | 0.00 | \$ \$ | | 00 | |
| | 8e. | Social Security | 8e | | \$- | 0.00 | \$- | | 00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | | \$ | 0.00 | \$_ | | 00 | |
| | 8g. | Pension or retirement income | 8g | ١. | \$ | 0.00 | \$ | 0. | 00 | |
| | | Salary from 2nd Job as Swim | | | | | | | | |
| | 8h. | Other monthly income. Specify: Coach | 8h | .+ | \$ | 1,847.00 | + \$_ | 0. | 00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 9 | \$ | 1,847.00 | \$_ | C | 0.00 | |
| 10 | Cald | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 4,174.69 + \$ | | 0.00 = \$ | 4 17 | 74.69 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | 4,174.03 | | - U.UU - V | 4,17 | 4.09 |
| 11. | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | 12. \$_ | | 74.69 |
| | | | | | | | | | nbined Ithly inco | ome |
| 13. | Do y ■ □ | you expect an increase or decrease within the year after you file this form? No. Yes. Explain: | ? | | | | | | y mot | |

Official Form 106I Schedule I: Your Income page 2

| Debtor 1 | Ryan H Swift | | 40.4000 |
|----------|--------------------|------------------------|----------|
| Debtor 2 | Jacqueline S Swift | Case number (if known) | 16-12239 |

Official Form B 6l Attachment for Additional Employment Information

| Debtor | | |
|---------------------|------------------------|--|
| Occupation | Swim Coach | |
| Name of Employer | MS Polk LLC | |
| How long employed | 9 years | |
| Address of Employer | 636 Ave. F | |
| . , | Boulder City, NV 89005 | |

Official Form 106I Schedule I: Your Income page 3

| ΞIII | in this information to identify your case: | | | | |
|------------|--|--|----------------|----------------------------------|---|
| | · · | | 0 | | |
| Deb | Ryan H Swift | | | if this is: In amended filing | |
| | otor 2 Jacqueline S Swift ouse, if filing) | | _ A | supplement show | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the: DISTRICT OF NEVADA | | N | MM / DD / YYYY | |
| | nown) 16-12239 | | | | |
| | ········, | | | | |
| | fficial Form 106J | | | | |
| Be info | chedule J: Your Expenses as complete and accurate as possible. If two married people are promation. If more space is needed, attach another sheet to this to mber (if known). Answer every question. | | | | |
| Par 1. | t 1: Describe Your Household Is this a joint case? | | | | |
| ١. | □ No. Go to line 2. | | | | |
| | Yes. Does Debtor 2 live in a separate household? | | | | |
| | ■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses | for Separate House | ehold of Debto | ır 2. | |
| 2. | Do you have dependents? ☐ No | , | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the dependents names. | Son | | 3 | □ No ■ Yes |
| | | Daughter | | 5 | □ No ■ Yes |
| | | Son | | 6 weeks | □ No ■ Yes |
| _ | | Daughter | | 8 | □ No ■ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes | | | | |
| exp | t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your says of a date after the bankruptcy is filed. If this is a suppolicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 1,250.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 50.00 |
| | 4d. Homeowner's association or condominium dues | | 4d. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as hor | me equity loans | 5. \$ | | 0.00 |

| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 6b. 6c. 6d. 7. 8. 9. 10. | \$ = \$ \$ = \$ \$ = \$ \$ = | 300.00 50.00 310.00 0.00 700.00 0.00 |
|---|--|---|---|
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 6b. 6c. 6d. 7. 8. 9. 10. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 50.00 310.00 0.00 700.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 6c. 6d. 7. 8. 9. 10. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 310.00 0.00 700.00 |
| 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 6d. 7. 8. 9. 10. | \$ \$ \$ \$ | 0.00 700.00 |
| 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 7. 8. 9. 10. 11. | \$ \$ \$ | 0.00 700.00 |
| 3. Childcare and children's education costs 4. Clothing, laundry, and dry cleaning 4. Personal care products and services | 8. 9. 10. 11. | \$ 5 | 700.00 |
| 9. Clothing, laundry, and dry cleaning 10. Personal care products and services | 9. 10. 11. | \$ | |
| 10. Personal care products and services | 10. 11. | | |
| | 11. | \$ | 100.00 |
| | | | 100.00 |
| 11. Medical and dental expenses | | \$ | 0.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. | 12. | c | 250.00 |
| Do not include car payments. | | \$ | |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | * | 100.00 |
| 14. Charitable contributions and religious donations | 14. | \$ | 400.00 |
| 15. Insurance. | | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance | 15a. | ¢ | 0.00 |
| | 15a. 15b. | | - |
| 15b. Health insurance | | · | 0.00 |
| 15c. Vehicle insurance | 15c. | \$ | 120.00 |
| 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| 17. Installment or lease payments: | | • | |
| 17a. Car payments for Vehicle 1 | 17a. | · | 400.00 |
| 17b. Car payments for Vehicle 2 | | \$ | 0.00 |
| 17c. Other. Specify: | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | 17d. | \$ | 0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| Other payments you make to support others who do not live with you. Specify: | 19. | \$ | 0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedu | _ | ur Income. | |
| 20a. Mortgages on other property | 20a. | | 0.00 |
| 20b. Real estate taxes | 20b. | · | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 21. Other: Specify: | 21. | · | |
| 11. Other. Specify. | _ 21. | тФ | 0.00 |
| 22. Calculate your monthly expenses | | | |
| 22a. Add lines 4 through 21. | | \$ | 4,130.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,130.00 |
| 23. Calculate your monthly net income. | | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,174.69 |
| 23b. Copy your monthly expenses from line 22c above. | 23b. | * | 4,130.00 |
| | | | |
| Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ | 44.69 |
| 24. Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your m modification to the terms of your mortgage? ■ No. □ Yes. Explain here: | | | ase or decrease because of a |

| Fill in this infor | mation to identify your | case: | | | |
|----------------------------------|--|-----------------------------|-------------|---|--|
| Debtor 1 | Ryan H Swift | | | | |
| 20010. | First Name | Middle Name | La | st Name | |
| Debtor 2 | Jacqueline S Swi | ft | | | |
| (Spouse if, filing) | First Name | Middle Name | La | st Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Case number | 16-12239 | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official Forr Declarat | | n Individual I | Debt | or's Schedules | 12/15 |
| f two married po | eople are filing togethe | r, both are equally respons | sible for s | supplying correct information. | |
| obtaining mone | | n connection with a bankri | | ed schedules. Making a false state ee can result in fines up to \$250,00 | |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorne | ey to help | you fill out bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the summ | ary and s | schedules filed with this declaration | on and |
| X /s/ Rva | an H Swift | | x | /s/ Jacqueline S Swift | |
| Ryan I | H Swift ure of Debtor 1 | | _ ~ | Jacqueline S Swift Signature of Debtor 2 | |
| Signatu | iie oi Debioi i | | | Signature of Debtor 2 | |

Date May 6, 2016

Date **May 6, 2016**

| Fill | in this inform | nation to identify you | r case: | | | |
|------|-------------------------|-----------------------------------|---|---|---|---|
| De | btor 1 | Ryan H Swift | | | | |
| | | First Name | Middle Name | Last Name | | |
| 1 | btor 2 | Jacqueline S Sw | | LastNava | | |
| (Spo | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Bar | kruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Ca | se number 1 | 6-12239 | | | | |
| 1 | nown) | 0 12200 | | | | Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| Of | ficial For | rm 107 | | | | |
| | | | Affairs for Individ | duals Filing for F | lankruntov | 4/1 |
| | | | | | | |
| | | | | | equally responsible for sup y additional pages, write yo | |
| | | i). Answer every que | | uns form. On the top of an | y additional pages, write yo | ui ilaille allu case |
| | · Chu D | etaila Abaut Vaun Ma | wital Ctatus and Milean Van | . I had Defens | | |
| Pal | it 1: Give D | etalis About Your Ma | arital Status and Where You | Livea Before | | |
| 1. | What is your | current marital statu | is? | | | |
| | = | | | | | |
| | ■ Married □ Not married | riod | | | | |
| | □ Not man | nea | | | | |
| 2. | During the la | ıst 3 years, have you | lived anywhere other than | where you live now? | | |
| | □ No | | | | | |
| | | t all of the places you | ived in the last 3 years. Do no | at include where you live no | v. | |
| | - 165. LISI | all of the places you i | ived in the last 3 years. Do no | of include where you live not | v. | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ddress: | Dates Debtor 2 lived there |
| | | dise Vista Dr n, NV 89014-2622 | From-To: 2013 - 2015 | ■ Same as Debtor | 1 | Same as Debtor 1 From-To: |
| 3. | | | | | nity property state or territor | |
| stat | es and territorie | es include Arizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto R | ico, Texas, Washington and \ | Visconsin.) |
| | □ No | | | | | |
| | _ | ke sure vou fill out Sci | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| | | , | (0) | | | |
| Pai | rt 2 Explain | n the Sources of You | r Income | | | |
| _ | | | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | _ | in the details. | | | | |
| | 103.1III | trio dotalio. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |

Official Form 107

| | btor 1 | | equeline s | | | | Case number (if known) | 16-12239 | |
|----------|--------|------------|---------------------------|--------------------------------|---|---|------------------------------|---------------|---|
| | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inc | | Gross income (before deductions and exclusions) |
| | | | 1 of curre iled for ba | nt year until nkruptcy: | ■ Wages, commissions, bonuses, tips | \$10,804.0 | 00 ☐ Wages, combonuses, tips | missions, | \$0.00 |
| | | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | | | dar year: December | 31, 2015) | ■ Wages, commissions, bonuses, tips | \$99,944.0 | 00 ☐ Wages, combonuses, tips | missions, | \$0.00 |
| | | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | | | lar year be December | | ■ Wages, commissions, bonuses, tips | \$98,428.0 | 00 ☐ Wages, combonuses, tips | missions, | \$0.00 |
| | | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | _ | No Yes. | Fill in the do | etails. | Debtor 1 Sources of income | Gross income from | Debtor 2 Sources of inc | | Gross income |
| | | | | | Sources of income Describe below. | each source | Describe below | | (before deductions |
| _ | | | | | | (before deductions and exclusions) | | | and exclusions) |
| | | | dar year: December | 31, 2015) | Pensions & Annuities | \$16,678.0 | 00 | | |
| Ра 6. | _ | | Debtor 1's | s or Debtor 2 ebtor 1 nor D | Made Before You Filed for I s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol | debts? mer debts. Consumer d | lebts are defined in 11 | U.S.C. § 10° | 1(8) as "incurred by an |
| | | | □ No. | 90 days befo Go to line 7 | re you filed for bankruptcy, di | d you pay any creditor a t | total of \$6,425* or mo | re? | |
| | | | ☐ Yes | paid that cr | each creditor to whom you paileditor. Do not include payment payments to an attorney for the | ts for domestic support o | | | |
| | _ | | | | on 4/01/19 and every 3 years | | on or after the date of | f adjustment. | |
| | | Yes. | | | r both have primarily consu re you filed for bankruptcy, di | | total of \$600 or more? | , | |
| | | | No. | Go to line 7 | | | | | |
| | | | □ Yes | include pay | each creditor to whom you pai ments for domestic support ol this bankruptcy case. | | | | |
| | Cred | ditor' | s Name an | d Address | Dates of payme | nt Total amount | Amount you | Was this p | payment for |

Debtor 1 Ryan H Swift

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 42 of 50

| | otor 1 otor 2 | Ryan H Swift Jacqueline S Swift | | Cas | se number (if kr | nown) 16-12239 | | |
|---|------------------|--|--|---|-------------------------------------|----------------------------|---|--|
| 7. | Inside of whi | n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny. | rtners; relatives of any gene control, or owner of 20% or | eral partners; partners of their voting | erships of whic g securities; ar | ch you are a gener | al partner; corporations agent, including one for | |
| | _ | No Yes. List all payments to an insider. | | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you | | r this payment | |
| 8. | insid | n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos | | ments or transfer a | any property o | on account of a d | lebt that benefited an | |
| | ` | No | | | | | | |
| | | Yes. List all payments to an insider der's Name and Address | Dates of payment | Total amount paid | Amount yo | | r this payment ditor's name | |
| Par | t 4: | Identify Legal Actions, Repossession | s, and Foreclosures | | | | | |
| Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | |
| | | e title e number | Nature of the case | Court or agency | | Status of the | he case | |
| 10. | | n 1 year before you filed for bankrupto k all that apply and fill in the details belov | | rty repossessed, f | foreclosed, ga | arnished, attache | d, seized, or levied? | |
| | _ | No. Go to line 11. Yes. Fill in the information below. | | | | | | |
| | Cred | litor Name and Address | Describe the Property Explain what happened | | | Date | Value of the property | |
| Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | amounts from your | | |
| | Cred | litor Name and Address | Describe the action the | creditor took | | Date action was aken | Amount | |
| 12. | | n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a | | rty in the possess | ion of an assi | ignee for the ben | efit of creditors, a | |
| | | No Yes | | | | | | |
| Par | t 5: | List Certain Gifts and Contributions | | | | | | |
| 13. | = 1 | n 2 years before you filed for bankrup No Yes. Fill in the details for each gift. | tcy, did you give any gifts | with a total value | of more than | ı \$600 per person | ? | |
| | Gifts | s with a total value of more than \$600 person | Describe the gifts | | | Dates you gave he gifts | Value | |
| | | on to Whom You Gave the Gift and ress: | | | | | | |

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 43 of 50

| | otor 1 Ryan H Swift otor 2 Jacqueline S Swift | | Case numb | per (if known) 16-12239 | |
|-----|---|---------|--|---|----------------------------|
| 14. | Within 2 years before you filed for bank ☐ No ☐ Yes. Fill in the details for each gift or | | did you give any gifts or contributions with a t | otal value of more than | n \$600 to any charity? |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | total | Describe what you contributed | Dates you contributed | Value |
| | The Church of Jesus Christ of LDS 50 N Temple Salt Lake City, UT 84150 | | Tithes & Offerings | monthly contributions of ~\$400 | \$4,800.00 |
| Par | t 6: List Certain Losses | | | | |
| 15. | or gambling? | uptcy o | r since you filed for bankruptcy, did you lose a | nything because of the | eft, fire, other disaster, |
| | ☐ Yes. Fill in the details. Describe the property you lost and how the loss occurred | Includ | ribe any insurance coverage for the loss le the amount that insurance has paid. List pendinance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfe | rs | | | |
| 16. | consulted about seeking bankruptcy or | rprepar | did you or anyone else acting on your behalf paing a bankruptcy petition? ers, or credit counseling agencies for services requ | | erty to anyone you |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Clear Counsel Law Group 50 S. Stephanie St., Ste 101 Henderson, NV 89012 bankruptcy@clearcounsel.com | | Attorney Fees | 4/18/2016 | \$500.00 |
| | 001 Debtorcc, Inc. 378 Summit Ave. Jersey City, NJ 07306 debtoredu.com | | Credit Counseling Course | 4/21/2016 | \$14.95 |
| 17. | | editors | did you or anyone else acting on your behalf pa or to make payments to your creditors? sted on line 16. | y or transfer any prop | erty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

| Del | btor 2 | Jacqueline S Swift | | | | Case | e number (if known) | 16-12239 | | | | |
|-------|---|---|--|---|-----------------------------------|--|--|---|------------------------|--|--|--|
| 18. | transf Includinclude | n 2 years before you filed for bankrupto erred in the ordinary course of your be e both outright transfers and transfers ma e gifts and transfers that you have alread | u sin ade a | ess or financial affa is security (such as t | i irs? he granting of a | | | • | | | | |
| | _ ' | es. Fill in the details. | | | | | | | | | | |
| | Perso Addr | on Who Received Transfer ess | | Description and v property transferr | | ķ | Describe any pro Dayments receive Daid in exchange | ed or debts | Date transfer was made | | | |
| | Perso | Person's relationship to you | | | | | | | | | | |
| 19. | benef | n 10 years before you filed for bankrup iciary? (These are often called asset-pro | | | y property to a | a self- | settled trust or s | milar device o | of which you are a | | | |
| | _ | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of trust Description and value of the pro | | | | | | transferred | | Date Transfer was | | | |
| | 2000 pilot and 12.20 St the property statistical | | | | | | | | made | | | |
| Par | rt 8: | List of Certain Financial Accounts, Ins | trun | nents, Safe Deposit | Boxes, and S | torage | Units | | | | | |
| 20. | sold, i | n 1 year before you filed for bankruptc moved, or transferred? le checking, savings, money market, o es, pension funds, cooperatives, assoc | r oth | ner financial accour | nts; certificate | s of de | - | _ | | | | |
| | | lo | | | | | | | | | | |
| | _ | es. Fill in the details. | | | | | | | | | | |
| | | e of Financial Institution and ess (Number, Street, City, State and ZIP | Last 4 digits of Type of account number instrument | | ount or | Date acco closed, so moved, or transferre | old, | Last balance before closing o transfe | | | | |
| 21. | | u now have, or did you have within 1 y or other valuables? | ear/ | before you filed for | bankruptcy, a | ıny sat | fe deposit box o | other deposi | tory for securities, | | | |
| | _ | lo ′es. Fill in the details. | | | | | | | | | | |
| | | e of Financial Institution ess (Number, Street, City, State and ZIP Code) | | Who else had acc Address (Number, St State and ZIP Code) | | Desc | cribe the content | s | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | | | | |
| | _ | lo 'es. Fill in the details. | | | | | | | | | | |
| | | e of Storage Facility ess (Number, Street, City, State and ZIP Code) | | Who else has or h to it? Address (Number, State and ZIP Code) | | Des | cribe the content | :s | Do you still have it? | | | |
| Par | rt 9: | Identify Property You Hold or Control | for S | Someone Else | | | | | | | | |
| 23. | - | u hold or control any property that so meone. | neo | ne else owns? Inclu | ıde any prope | rty you | ı borrowed from | , are storing fo | or, or hold in trust | | | |
| | | lo 'es. Fill in the details. | | | | | | | | | | |
| | | er's Name ess (Number, Street, City, State and ZIP Code) | | Where is the prop (Number, Street, City, S Code) | | Desc | cribe the propert | у | Value | | | |
| Par | rt 10: | Give Details About Environmental Info | rma | tion | | | | | | | | |
| For | the pu | rpose of Part 10, the following definition | ons a | apply: | | | | | | | | |
| | Envir | onmental law means any federal, state | , or I | ocal statute or regu | ılation concer | ning p | ollution, contam | ination, releas | ses of hazardous or | | | |
| Offic | ial Form | 107 Stateme | ent o | f Financial Affairs for I | Individuals Filin | g for B | ankruptcy | | page | | | |

Ryan H Swift

Debtor 1

page 5

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 45 of 50

Debtor 1 Ryan H Swift
Debtor 2 Jacqueline S Swift

Case number (if known) 16-12239

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. **Date Issued** Name

Part 12: Sign Below

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

(Number, Street, City, State and ZIP Code)

Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 46 of 50

| Debtor 1 | Ryan H Swift | | | |
|------------|--------------------------------------|--|------------------|--------------------------------|
| Debtor 2 | Jacqueline S Swift | Case numl | ber (if known) | 16-12239 |
| with a bar | | a false statement, concealing property, or obtaining o \$250,000, or imprisonment for up to 20 years, or b | | roperty by fraud in connection |
| /s/ Ryan | H Swift | /s/ Jacqueline S Swift | | |
| Ryan H | Swift | Jacqueline S Swift | | |
| Signature | e of Debtor 1 | Signature of Debtor 2 | | |
| Date M | ay 6, 2016 | Date <u>May</u> 6, 2016 | | |
| Did you at | ttach additional pages to Your State | ment of Financial Affairs for Individuals Filing for Ba | ankruptcy (Of | fficial Form 107)? |
| ■ No | | | | |
| ☐ Yes | | | | |
| Did you pa | ay or agree to pay someone who is r | oot an attorney to help you fill out bankruptcy forms | ? | |
| | Attack the David | www.mateur Bestition Browners and Maties - Declaration - and Ciny | | Farm (140) |
| ☐ res. Na | ame of Person Attach the <i>Bank</i> | rruptcy Petition Preparer's Notice, Declaration, and Sign | iature (Official | roiiii 119). |

| Fill in this inform | ation to identify your ca | se: | | |
|----------------------|---|--------------------|--|--|
| Debtor 1 | | 50. | | |
| Debtor 1 | Ryan H Swift First Name | Middle Name | Last Name | |
| Debtor 2 | Jacqueline S Swift | Middle Nove | Loot Norse | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ban | kruptcy Court for the: | DISTRICT OF NE | VADA | |
| | 6-12239 | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| O#: a: a! Fa # | 100 | | | |
| Official For | | : | | - |
| Statemen | t of Intention | tor Indiv | riduals Filing Under Chapt | er / 12/15 |
| If you are an indiv | idual filing under chapte | er 7 vou must fil | Lout this form if | |
| | claims secured by your | - | out this form ii. | |
| _ | d personal property and | , | ot expired. | |
| You must file this | form with the court with | nin 30 days after | you file your bankruptcy petition or by the date s | |
| wnicnev on the fo | • | court extends th | e time for cause. You must also send copies to the | ne creditors and lessors you list |
| If two married nec | onle are filing together in | a joint case ho | th are equally responsible for supplying correct i | information Both debtors must |
| | I date the form. | r a joint case, bo | thrane equally responsible for supplying correct i | mormation. Both debtors must |
| | nd accurate as possible. ur name and case numb | | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| | | , | | |
| Part 1: List You | ur Creditors Who Have S | secured Claims | | |
| information bel | ow. | | : Creditors Who Have Claims Secured by Propert | |
| identity the cred | ditor and the property that | i is collateral | What do you intend to do with the property that secures a debt? | at Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's Sc | e Fcu | | ☐ Surrender the property. | □No |
| name: | | | Retain the property and redeem it. | |
| Description of | 2012 Dodge Caravan | 00 000 | ☐ Retain the property and enter into a | ■ Yes |
| property | miles | 90,000 | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | | | Retain the property and [explain]. Retain and make regular payments | |
| | | | | |
| | ur Unexpired Personal P d personal property leas | | in Schedule G: Executory Contracts and Unexpir | red Leases (Official Form 106G), fill |
| in the information | below. Do not list real e | estate leases. Un | expired leases are leases that are still in effect; the | he lease period has not yet ended. |
| rou may assume | an unexpired personal p | roperty lease in | the trustee does not assume it. 11 U.S.C. § 365(p) | ((2). |
| Describe your un | expired personal prope | rty leases | | Will the lease be assumed? |
| Lessor's name: | | | | □ No |
| Description of leas | sed | | | 1 140 |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | □ No |
| Description of leas | sed | | | _ |
| Property: | | | | ☐ Yes |
| Lessor's name: | | | | |
| Official Form 108 | | Statement of In | tention for Individuals Filing Under Chapter 7 | page 1 |

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Case 16-12239-mkn Doc 12 Entered 05/06/16 16:58:42 Page 48 of 50

| Description of leased Property: | | otor 1 otor 2 | | n H Swift ueline S Swift | | | | Case number (| if known) | 16-12239 |
|---|-------------|---------------------|---------------------|--|---|----|-----|--------------------|-----------|-------------------------------|
| Description of leased Property: | | | n of lea | ased | | | | | | |
| Description of leased Property: | Des | cription | | ased | | | | | | |
| Description of leased Property: Lessor's name: Description of leased Property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Ryan H Swift Ryan H Swift Signature of Debtor 1 Ryan H Swift Signature of Debtor 2 | Des | cription | | ased | | | | | | |
| Description of leased Property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Ryan H Swift Ryan H Swift Signature of Debtor 1 X /s/ Jacqueline S Swift Jacqueline S Swift Signature of Debtor 2 | Des | cription | | ased | | | | | | |
| Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Ryan H Swift Ryan H Swift Signature of Debtor 1 X /s/ Jacqueline S Swift Jacqueline S Swift Signature of Debtor 2 | Des | cription | | ased | | | | | | |
| Signature of Debtor 1 Signature of Debtor 2 | Und prop | er pena perty th | alty of hat is s | perjury, I declare th subject to an unexpi I Swift | at I have indicated my in red lease. | | /s/ | Jacqueline S Swift | that sec | cures a debt and any personal |
| Date May 6, 2016 Date May 6, 2016 | | - | ature of | | | Da | Sig | - | | |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

| In | Ryan H Swift re Jacqueline S Swift | | Case No. | 16-12239 | | | | | |
|------|--|---|---|-------------------------|--------------|--|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | | |
| | DISCLOSURE OF COMPENS | ATION OF ATTOR | RNEY FOR DE | BTOR(S) | | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or | f the petition in bankruptcy, | or agreed to be paid | o me, for services rend | lered or to | | | | |
| | For legal services, I have agreed to accept | | \$ | 2,000.00 | | | | | |
| | Prior to the filing of this statement I have received | | \$ | 500.00 | | | | | |
| | Balance Due | | \$ | 1,500.00 | | | | | |
| 2. | The source of the compensation paid to me was: | | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation | ation with any other person | unless they are memb | ers and associates of n | ny law firm. | | | | |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | | firm. A | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | | | |
| | a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Debtors and Attorney have entered into two | nt of affairs and plan which and confirmation hearing, an o separate fee agreemen | may be required; and any adjourned hear ants. The first was | ings thereof; | tition, for | | | | |
| | the filing of a skeletal bankruptcy petition, agreement was for \$1,500, signed post-petion at the 341 meeting of creditors. | tion, for the completion | of the balance of | schedules and | d fee | | | | |
| 6. | By agreement with the debtor(s), the above-disclosed fee do | es not include the following | service: | | | | | | |
| | (| CERTIFICATION | | | | | | | |
| this | I certify that the foregoing is a complete statement of any ags bankruptcy proceeding. | reement or arrangement for | payment to me for re | presentation of the deb | otor(s) in | | | | |
| | May 6, 2016 | /s/ Matthew M. Mo | Arthur | | | | | | |
| | Date | Matthew M. McAr Signature of Attorne | | | • | | | | |
| | | Clear Counsel La | | | | | | | |
| | | 50 S. Stephanie S | | | | | | | |
| | | Henderson, NV 89 702-476-5900 Fa | | | | | | | |
| | | bankruptcy@clea | | | _ | | | | |
| | | Name of law firm | | | | | | | |

United States Bankruptcy Court District of Nevada

| In re | Ryan H Swift Jacqueline S Swift | | Case No. | 16-12239 |
|-------|------------------------------------|-----------|----------|----------|
| | | Debtor(s) | Chapter | 7 |
| | | | | |
| | | | | |

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

| Date: | May 6, 2016 | /s/ Ryan H Swift | |
|-------|-------------|------------------------|--|
| | | Ryan H Swift | |
| | | Signature of Debtor | |
| Date: | May 6, 2016 | /s/ Jacqueline S Swift | |
| | | Jacqueline S Swift | |
| | | Signature of Debtor | |